
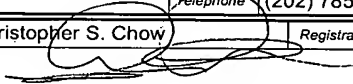


01/04/02

10035197 U.S. PTO

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Please type a plus sign (+) inside this box ☒Approved for use through 10/31/2002. OMB 0651-0032
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UTILITY PATENT APPLICATION TRANSMITTAL		Attorney Docket No. M4065.0488/P488	
(Only for new nonprovisional applications under 37 CFR 1.53(b))		First Inventor	John Moore
		Title	PCRAM REWRITE PREVENTION
		Express Mail Label No.	
APPLICATION ELEMENTS		ADDRESS TO: Box Patent Application Commissioner for Patents Washington, DC 20231	
See MPEP chapter 600 concerning utility patent application contents.			
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original, and a duplicate for fee processing)		7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)	
2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.		8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)	
3. <input checked="" type="checkbox"/> Specification [Total Pages 32] (preferred arrangement set forth below)		a. <input type="checkbox"/> Computer Readable Form (CRF)	
- Descriptive title of the invention		b. Specification Sequence Listing on:	
- Cross Reference to Related Applications		i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or	ii. <input type="checkbox"/> paper
- Statement Regarding Fed sponsored R & D		c. <input type="checkbox"/> Statements verifying identity of above copies	
- Reference to sequence listing, a table, or a computer program listing appendix		ACCOMPANYING APPLICATIONS PARTS	
- Background of the Invention		9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))	
- Brief Summary of the Invention		10. <input checked="" type="checkbox"/> 37 CFR 3.73(b) Statement (when there is an assignee)	<input checked="" type="checkbox"/> Power of Attorney
- Brief Description of the Drawings (if filed)		11. <input type="checkbox"/> English Translation Document (if applicable)	
- Detailed Description		12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449	<input type="checkbox"/> Copies of IDS Citations
- Abstract of the Disclosure		13. <input type="checkbox"/> Preliminary Amendment	
4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 10]		14. <input type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)	
5. Oath or Declaration [Total Pages 3]		15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)	
a. <input checked="" type="checkbox"/> Newly executed (original or copy)		16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.	
b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 19 completed)		17. <input type="checkbox"/> Other:	
i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).			
6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76			
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No.: _____ Prior application information: Examiner _____ Group / Art Unit: _____ For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.			
19. CORRESPONDENCE ADDRESS			
<input checked="" type="checkbox"/> Customer Number or Bar Code Label	 24998		or <input type="checkbox"/> Correspondence address below
Name	DICKSTEIN SHAPIRO MORIN & OSHINSKY LLP Christopher S. Chow		
Address	2101 L Street NW		
City	Washington	State	DC
Country	US	Zip Code	20037-1526
	Telephone	(202) 785-9700	Fax (202) 887-0689
Name (Print/Type)	Christopher S. Chow	Registration No. (Attorney/Agent)	46,493
Signature		Date	January 4, 2002

FEE TRANSMITTAL for FY 2002		Complete if Known	
Patent fees are subject to annual revision.		Application Number	Not Yet Assigned
		Filing Date	January 4, 2002
		First Named Inventor	John Moore
		Examiner Name	Not Yet Assigned
		Group Art Unit	N/A
		Attorney Docket No.	M4065.0488/P488
TOTAL AMOUNT OF PAYMENT (\$)		1,356.00	

METHOD OF PAYMENT	FEE CALCULATION (continued)																																																																																																																																																																																																																																																																																																						
<p>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:</p> <p>Deposit Account Number: 04-1073</p> <p>Deposit Account Name: </p> <p><input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27</p> <p>2. <input checked="" type="checkbox"/> Payment Enclosed</p> <p><input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other</p> <p style="text-align: center; font-weight: bold;">FEE CALCULATION</p> <p>1. 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EXTRA CLAIM FEES</p> <table style="width: 100%; font-size: 0.8em;"> <thead> <tr> <th>Total Claims</th> <th>Independent Claims</th> <th>Multiple Dependent</th> <th>Extra Claims</th> <th>Fee from below</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>38</td> <td>-20** =</td> <td></td> <td>18</td> <td>18.00</td> <td>324.00</td> </tr> <tr> <td>6</td> <td>-3** =</td> <td></td> <td>3</td> <td>84.00</td> <td>252.00</td> </tr> <tr> <td colspan="5"></td> <td></td> </tr> </tbody> </table> <p>Large Entity Small Entity</p> <table style="width: 100%; font-size: 0.8em;"> <thead> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>103</td> <td>18</td> <td>203</td> <td>9</td> <td>Claims in excess of 20</td> <td></td> </tr> <tr> <td>102</td> <td>84</td> <td>202</td> <td>42</td> <td>Independent claims in excess of 3</td> <td></td> </tr> <tr> <td>104</td> <td>280</td> <td>204</td> <td>140</td> <td>Multiple dependent claim, if not paid</td> <td></td> </tr> <tr> <td>109</td> <td>84</td> <td>209</td> <td>42</td> <td>** Reissue independent claims over original patent</td> <td></td> </tr> <tr> <td>110</td> <td>18</td> <td>210</td> <td>9</td> <td>** Reissue claims in excess of 20 and over original patent</td> <td></td> </tr> <tr> <td colspan="5" style="text-align: right;">SUBTOTAL (2) (\$)</td> <td>576.00</td> </tr> </tbody> </table> <p>** or number previously paid, if greater; For Reissues, see above</p>	Large Entity Fee Code	Large Entity Fee (\$)	Small Entity Fee Code	Small Entity Fee (\$)	Fee Description	Fee Paid	101	740	201	370	Utility filing fee	740.00	106	330	206	165	Design filing fee		107	510	207	255	Plant filing fee		108	740	208	370	Reissue filing fee		114	160	214	80	Provisional filing fee		SUBTOTAL (1) (\$)					740.00	Total Claims	Independent Claims	Multiple Dependent	Extra Claims	Fee from below	Fee Paid	38	-20** =		18	18.00	324.00	6	-3** =		3	84.00	252.00							Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid	103	18	203	9	Claims in excess of 20		102	84	202	42	Independent claims in excess of 3		104	280	204	140	Multiple dependent claim, if not paid		109	84	209	42	** Reissue independent claims over original patent		110	18	210	9	** Reissue claims in excess of 20 and over original patent		SUBTOTAL (2) (\$)					576.00	<p>3. 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SUBMITTED BY		Complete (if applicable)	
Name (print/type)	Christopher S. Chow	Registration No. (Attorney/Agent)	46,493
Signature		Telephone	(202) 775-4756
		Date	January 4, 2002